

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



March 23, 1993

ALL-COUNTY LETTER NO. 93-22

TO: ALL COUNTY WELFARE DIRECTORS
ALL GAIN COORDINATORS

Reason for this Transmittal

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> | State Law Change |
| <input type="checkbox"/> | Federal Law Change |
| <input type="checkbox"/> | Court Order or Settlement Agreement |
| <input type="checkbox"/> | Clarification Requested by One or More Counties |
| <input checked="" type="checkbox"/> | Initiated by CDSS |

SUBJECT: ACCURATE REPORTING OF THE MANDATORY GAIN CASELOAD

REFERENCE: ALL COUNTY INFORMATION NOTICE I-71-91
ALL COUNTY INFORMATION NOTICE I-43-92

This letter is written to emphasize the importance of an accurate reporting of the mandatory caseload for the Greater Avenues for Independence (GAIN) Program, to explain the effect of this reporting on the receipt of enhanced federal funding for GAIN, and to provide revised instructions for completing the CA 237 GAIN, Required Participation Report.

As you know, California's enhanced federal funding for GAIN is contingent on the State meeting the federally required participation rate, which for Federal Fiscal Year (FFY) 1992 was 11 percent. (We will notify the counties of our participation rate for this period as soon as our data is confirmed by the federal government.) The State must again demonstrate that for FFY 1993, 11 percent of GAIN-mandatory Aid to Families with Dependent Children (AFDC) recipients are on average scheduled to participate in GAIN for 20 hours per week, and are in attendance no less than 75 percent of the monthly hours scheduled. Failure to meet these standards would result in the loss of enhanced funding for GAIN, which for State Fiscal Year 1993/94 could amount to as much as \$31 million (based on the increased amount included for GAIN in the Governor's proposed budget).

The emphasis in our previous instructions to counties on this subject was to increase the participation hours of AFDC recipients in the GAIN Program. Equally important, however, is the accurate determination of the GAIN-mandatory caseload. The greater the number of AFDC recipients in the GAIN-mandatory caseload (the denominator), the greater the number of participation hours (the numerator) that are needed to meet the federal participation rate. During the implementation of the ongoing participation reporting system using the CA 237, it became evident that the mandatory caseload was being overstated. Counties have reported to our Statistical Services Bureau that, on occasion, there has been a lack of coordination between the AFDC Program and the GAIN Program when reconciling this caseload. This has led to situations where non-mandatory individuals have been reported as mandatory. It is essential that counties take steps to ensure that this does not occur. Counties must have a process which will enable AFDC Program

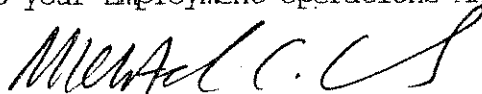
staff and GAIN Program staff to verify the mandatory status of each individual on an ongoing basis. State staff (Statistical Services and/or Employment Programs) may be able to assist in the development of such a process if this is desired by the counties.

In addition, we have been informed by the Federal Department of Health and Human Services that, effective October 1, 1992, we can no longer exclude from the denominator second parents in AFDC-Unemployed Parent (AFDC-U) cases. Unless these second parents meet an exemption or another deferral criterion, or have other good cause for not participating, they must be included in the denominator. Instructions for the CA 237 GAIN have been revised by the Statistical Services Bureau to reflect this change. A copy is attached for county use.

For your convenience, we are providing a list of criteria that identifies which individuals are to be classified as non-mandatory and, therefore, excluded from the denominator calculation:

1. Those who are determined exempt in accordance with the criteria in Manual of Policies and Procedures (MPP) Section 42-788-799.
2. Those who have been deferred from participation in accordance with criteria in MPP Section 42-761.4 and .5, including those who are members of a control group. (Individuals who have been deferred due to employment of 15-29 hours per week or being in the first trimester of pregnancy must still be included in the denominator as federal regulations do not allow these deferrals.)
3. Those who have been determined to have good cause for not participating at any time during the month in accordance with the criteria in MPP Section 42-782.
4. Those who have been sanctioned. Counties should make every effort to send sanction Notices of Action (NOAs) to appropriate individuals as promptly as possible. Those to whom a sanction NOA has been sent are classified as non-mandatory.
5. Those for whom there is documentation that they were not brought into or were removed from the GAIN Program due to the inability of the county to provide needed child care services. This determination must be made on a case-by-case basis.

We appreciate your cooperation in this important effort. If you need further information regarding the reporting of the GAIN-mandatory caseload, please contact Mr. Levy St. Mary of the Statistical Services Bureau at (916) 445-2135. Program questions may be directed to your Employment Operations Analyst at (916) 657-3403.



MICHAEL C. GENEST
Deputy Director
Welfare Programs Division

Attachment

AID TO FAMILIES WITH DEPENDENT CHILDREN (AFDC) -
GREATER AVENUES FOR INDEPENDENCE (GAIN)
STATISTICAL REPORT OF REQUIRED PARTICIPATION
IN GAIN (FORM CA 237 GAIN)

CONTENT

For the AFDC/GAIN Programs this report provides monthly data on the movement of individuals and cases who are required to participate in the GAIN Program.

PURPOSE

The purpose of this data is (1) to provide county, state and federal administrators with information needed for budgeting, staffing, program planning and for other administrative responsibilities; (2) to provide other interested persons and agencies with information on the status and trends of the AFDC/GAIN Program; and (3) to meet the federal reporting mandates.

DISTRIBUTION

Data in this report is compiled and transmitted as part of California's monthly and quarterly reports to the Social Security Administration, U.S. Department of Health and Human Services.

DUE DATE

Reports are to be received in Sacramento on or before the 20th calendar day of the month following the report month. Send report to:

State Department of Social Services
Statistical Services
744 P Street, Mail Station 19-81
Sacramento, CA 95814

When data is unavailable, or has not been reconciled, transmit a report by the due date containing all available information. Attach a note indicating when the department can expect to receive the rest of the report. Forward missing figures promptly as soon as possible.

DEFINITIONS

Individuals (FOR THE PURPOSE OF THIS REPORT) - Person/s who apply and are approved for AFDC, current recipients who are redetermined eligible, eligible by way of 1) an Inter-County transfer, 2) a restoration, 3) other approval, etc.

Recipient - Individual/s approved for AFDC by a new application, redetermination, Inter-County transfer, etc.

Required Participant - An individual approved for AFDC and is non-exempt from participation in the GAIN Program. (This includes those who are mandatory volunteers/and does not include exempt volunteers)

Exempt - A person may be exempt from mandatory GAIN participation as follows:

- o Those who have been determined to have good cause for not participating including those for whom the State cannot guarantee child care as determined on a case-by-case basis;

- o Those who reside in a county in which the GAIN program is not operated;
- o Those who are working 30 or more hours per week regardless of when they became employed;
- o Those to whom a Notice of Action(NOA) sanction has been sent;
- o The parent is in an unemployed parent assistance unit and is caring for a child under three. (THIS EXEMPTION CAN ONLY APPLY TO ONE PARENT)
- o The parent or other relative of a child under the age of 3 who is personally providing care for the child, except for 16-19 year old parents who do not possess a high school diploma or equivalent;

(A woman who is 16-19 and does not possess a high school diploma or equivalent, and her physician prescribes a specified period of postpartum recovery)
- o An individual 16, 17, or 18 years of age who is a full time student in an elementary school, high school, vocational, or technical school;
- o An individual who is ill or injured, when determined that the illness or injury is serious enough by itself to prevent entry into employment or training;
- o An individual is 60 or older;
- o An incapacitated individual when determined that the individual has a physical or mental impairment, by itself or in conjunction with age, which prevents the individual from engaging in employment or training;
- o A caretaker whose presence in the home is required on a substantially continuous basis because of the physical or mental impairment of another member of the household;
- o A woman who is in at least the fourth month of pregnancy, or
- o An individual who is a VISTA volunteer.

Deferred - A person may be deferred for any one or more of the following reasons:

- o A person is enrolled in a Self-initiated Program(SIP), no labor market connection or cannot be completed in two years;
- o Alcoholism or drug addiction;
- o Emotional or mental problems;
- o Legal difficulties;
- o No legal right to work in the USA;
- o Severe family crisis;
- o Good standing in union;

- o Temporarily laid off with call back date;
- o Medically-verified illness;
- o No child care;
- o No transportation;
- o A teen parent with special needs that cannot be met;
- > o ~~Second parent, first parent participating, or~~
- o An individual attending an education/training program that is not approved as a SIP, may be deferred in order to permit the completion of the program semester, quarter or increment of not more than six months.

INSTRUCTIONS

Submit reports on the designated form, (Form CA 237 GAIN).

PART A. RECIPIENTS

PART A SUMMARIZES THE NUMBER OF INDIVIDUALS REQUIRED TO PARTICIPATE IN THE GAIN PROGRAM DURING THE REPORT MONTH. (THOSE WHO ARE NOT EXEMPT OR DEFERRED, REGARDLESS OF WHETHER THEY HAVE BEEN REFERRED TO GAIN)

1. **Brought forward from last month** - Enter the number of required participants from previous month. If not the same figure as Item 7 of previous month, explain in footnote. (Place footnote on reverse side of report)
2. **Total number of individuals determined eligible during the report month** - Enter the total number of individuals determined eligible to receive AFDC benefits because they were an approved applicant, deemed eligible at re-determination, were eligible by way of a restoration of benefits, Inter-County transfer, other approval, etc.
3. **Total number of recipients determined non-exempt during the report month** - Enter the total number of AFDC eligibles found to be non-exempt and therefore required to participate in the GAIN program at some time during the report month.

NOTE:

THIS TOTAL INCLUDES RECIPIENTS NEW TO AFDC, THOSE GOING THROUGH REDETERMINATION, INTER-COUNTY TRANSFERS, THOSE THAT HAVE LOST THEIR EXEMPTION STATUS, THOSE NO LONGER DEFERRED FROM PARTICIPATION, ETC.

4. **Transferred to another program segment** - Enter the number of individuals (required to participate) who transferred to another program segment during the report month. (For this item, show the transfer as a positive count in the column the individual/s transferred to and a negative count in the column they transferred from or vice versa.)
 - a. **To AFDC-FG from AFDC-U** - Enter the number of participants who transferred to the FG segment of the AFDC program (from U) during the report month.

- o Temporarily laid off with call back date;
- o Medically-verified illness;
- o No child care;
- o No transportation;
- o A teen parent with special needs that cannot be met, or
- o An individual attending an education/training program that is not approved as a SIP, may be deferred in order to permit the completion of the program semester, quarter or increment of not more than six months.

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 - a. **To AFDC-FG from AFDC-U** - Enter the number of participants who transferred to the FG segment of the AFDC program (from U) during the report month.

- b. **To AFDC-U from AFDC-FG** - Enter the number of participants who transferred to the U segment of the AFDC program (from FG) during the report month
5. **Total number of AFDC recipients required during the report month to participate in GAIN** - Enter the total number of AFDC non-exempt recipients required to participate in the GAIN program during the report month.
- This is a cumulative total which includes all recipients counted in item 3, plus those brought forward from last month (+ or -) those whose FG/U program segment has changed.
6. **Total number of recipients no longer required to participate in GAIN (total of a and b below)** - Enter the total number of recipients no longer required to participate in GAIN due to the following:
- a. **No longer on AFDC** - Enter the total number of recipients who are no longer required to participate in GAIN because they left the AFDC program at sometime during the report month,
- b. **No longer a mandatory individual** - Enter the total number of recipients who are no longer required to participate in GAIN because they were determined to be exempt, or were determined to have good cause since they meet the deferral criteria listed in these instructions.
7. **Carried forward to next month** - Enter number of participants carried forward to next month (Item 5 - Item 6).

PART B. CASES

8. **Cases brought forward from last month** - Enter the total number of cases carried forward from last month. (Item 14 last month or explain)
9. **Total number of cases determined eligible during the report month (equal to or less than Item 2 above)** - Enter the total number of cases determined eligible to receive AFDC benefits because it was a result of an approved applicant, a re-determination, a restoration of benefits, Inter-County transfer, other approval, etc.
10. **Total number of non-exempt cases added during the report month** - Enter the total number of AFDC cases found to be non-exempt and, therefore, would be required to participate in GAIN during the report month. (This number will be equal to or less than the number in Part A, Item 3)
11. **Transferred to another program segment** - Enter the number of cases which transferred to another program segment during the report month. (For this item, show the transfer as a positive count in the column the case/s transferred to and a negative count in the column they transferred from or vice versa.)
- a. **To AFDC-FG from AFDC-U** - Enter the number of cases which transferred to the FG segment of the AFDC program (from U) during the report month.
- b. **To AFDC-U from AFDC-FG** - Enter the number of cases which transferred to the U segment of the AFDC program (from FG) during the report month.

12. Total number of cases represented by the recipient count provided in Part A., Item 5. above - Enter in this item the total number of cases (both existing cases and those added during the month) (+ OR -) those whose FG/U program segment changed. (Item 8 plus Item 10 (plus or minus) Item 11a and 11b)

NOTE: This number is the total cases represented by the recipient count in Item 5 above.

13. Total number of cases no longer required to participate in GAIN (Total of a and b below) - Enter the total number of cases which are no longer in a participating status. This number should be the total of a. and b. below.

NOTE: This number is the total cases represented by the recipient count in Item 6 above.

- a. Cases discontinued from AFDC - Enter the total number of cases discontinued from AFDC during the report month.

NOTE: This item is the total cases represented by the recipient count in Item 6.a. above.

- b. No longer a mandatory individual in the case - Enter the total number of cases where the individual/s in the case are no longer required to participate in GAIN because they were determined to be exempt, or were determined to have good cause since they meet the deferral criteria listed in these instructions. (In a case where there may be more than one required participant, all should be determined either exempt or deferred before the case can be entered in this item.)

NOTE: This item is the total cases represented by the recipient count in Item 6.b. above.

14. Number of cases carried forward to next month - Enter the number of cases carried forward to the next month. (Item 12 minus Item 13).

PART C. TO BE USED UPON INSTRUCTION FROM SDSS

This section is to be used for required and voluntary footnotes.